PTO/SB/17 (10-08)
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Complete if Known Complete if Known

U/ Effor	tive on 12/08/2004								
FEE TRANSMITTAL For FY 2009				Filing Date J		10/541,092-Conf. #4260 June 29, 2005			
						Y. Chow			
				Applicant claims small entity status. See 37 CFR 1.27				Art Unit 2	
TOTAL AMOUNT OF PAYMENT (\$) 540.00				Attorney Docket No. SON-2903					
METHOD OF PAYME	NT (check all t	hat apply)							
Check Credit Card Money Order None Other (please identify):									
x Deposit Account Deposit Account Number: 18-0013 Deposit Account Name: Rader, Fishman & Grauer PLLC									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17									
FEE CALCULATION					•				
1. BASIC FILING, SEARC		•				_			
	—	G FEES Small Entity	SE	ARCH FEES Small Entity		ATION FEES Small Entity			
Application Type	Fee (\$)	Fee (\$)	<u>Fee (\$</u>		Fee (\$)	Fee (\$)	Fees F	Paid (\$)	
Utility	330	165	540	270	220	110			
Design	220	110	100	50	140	70			
Plant	220	110	330	165	170	85			
Reissue	330	165	540	270	650	325			
Provisional	220	110	, 0	0	0	0			
2. EXCESS CLAIM FEES							F (\$)	Small Entity	
Fee Description Each claim over 20 (including Reissues)							Fee (\$) 52	<u>Fee (\$)</u> 26	
Each independent claim over 3 (including Reissues)							220	110	
Multiple dependent claim		.,	: . :	All miles			390	195	
			F	ee Paid (\$) <u>Mu</u>		ultiple Dependent Claims			
or HP =	x	=			Fee	<u>(\$)</u> <u>F</u>	ee Paid (<u>5)</u>	
HP = highest number of total of		reater than 20.	_				· · · · · · · ·	_	
	ixtra Claims x	Fee (\$)	F	ee Paid (\$)					
- or HP = X = HP = highest number of independent claims paid for, if greater than 3.									
3. APPLICATION SIZE FI	EE								
If the specification and of listings under 37 CFI sheets or fraction the	R 1.52(e)), the	application siz	e fee du	ie is \$270 (\$135	for small en			0	
Total Sheets	Extra Sheets	Number o	of each a	dditional 50 or fr	action thereof	Fee (\$)	Fee	Paid (\$)	
- 100 = /50 = (round up to a whole number) x							Fees Paid (\$)		
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)							rees	Paid (\$)	
Other (e.g., late filing surcharge): 1401 Notice of appeal							540.00		
SUBMITTED BY	/(\	-//							
Signature	TT	V92	90	Registration No. (Attorney/Agent)	24,104/ 40,290	Telephone	(202) 955-3750		
Name (Print/Type) Ronald P. Kananen/Christopher M. Tobin Date							April 22, 2009		